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The monthly bibliography for
workers with the handicapped

The NATIONAL SOCIETY
for
CRIPPLED CHILDREN *and Adults, Inc.*
11 SO. LA SALLE ST. CHICAGO 2, ILL.

• Now in the 34th Year of Service

The NATIONAL SOCIETY



for

CRIPPLED CHILDREN *and* ADULTS

Founded in 1921, the National Society for Crippled Children and Adults, the Easter Seal Society, is a nationwide federation of fifty-two state and territorial societies dedicated to the purpose of helping crippled children and adults. This objective is implemented through a three-fold program:

Education of the public as a whole, of professional persons concerned with the care and treatment of the crippled, of the families of the crippled, particularly parents, and of volunteers and employers.

Research to provide increased knowledge of the causes and prevention of crippling, and of improved methods of care, education and treatment of crippled children and adults.

Direct services to improve the health, welfare, education, recreation and employment opportunities for the crippled, toward the goal of rehabilitation.

IMMEDIATE PROGRAM AND SERVICES

Services are determined by unmet needs, existing facilities, resources of the Society

and availability of trained personnel and include case finding, diagnostic clinics, medical care, physical, occupational, and speech therapy, treatment centers, rehabilitation centers and curative workshops, mobile clinics, special education, social service, psychological services, sheltered workshops and homebound employment, promotion of employment opportunities for the crippled, recreation, and provision of equipment and prosthetic devices.

The National headquarters provides professional consultation in program planning and community organization to state and local member societies. It maintains liaison with medical specialty groups, offers legislative guidance, a nationwide lending library devoted to literature on handicapping conditions, and a free national personnel registry and employment service which recruits and refers professional workers. It also has an active program of professional education, including scholarships and fellowships, summer workshops for training of professional personnel, exhibits at professional meetings and the publication and distribution of printed materials.

11 SOUTH LA SALLE STREET :: CHICAGO 3, ILLINOIS

ACCIDENTS

777. McFarland, Ross A. (695 Huntington Ave., Boston 15, Mass.)

Research in the field of accidental trauma. Military Med. June, 1955. 116:6:426-435.

In same issue: Cost of accidental trauma in the Armed Forces, by Col. Theodore C. Bedwell, Jr., p. 436-439. -Injuries incurred in aircraft accidents, by Col. H. G. Moseley, p. 440-445.

The writer, who is Director of the Commission on Accidental Trauma of Armed Forces Epidemiological Board, gives statistics on the magnitude of the accident problem and describes research thus far sponsored by the Commission. Research has stressed basic causes of accidents in the areas of 1) identifying personality and behavior traits leading to repeated errors, 2) defects in the design of equipment, 3) injuries and fatalities resulting from vehicular crashes, and 4) mathematical studies of the various inter-relationships of contributing causes of accidents.

The article by Col. Bedwell gives available data on the cost of accidental trauma to military personnel in the armed forces during 1953, with breakdowns on type of ground accidents, man days lost in each service, admission rates for injuries and disease, fatalities and disabling injury.

Col. Moseley, in his article, has analyzed injuries incurred in USAF aircraft accidents during the three-year period from January, 1951 through December, 1953. Fractures, cerebral injuries and burns were the most frequent major non-fatal injuries. Preventive measures are discussed.

ACCIDENTS--STATISTICS

778. Wain, Harry (69 West Raleigh Avenue, Mansfield, Ohio)

An experience in home injury prevention, by Harry Wain, Harold E. Samuelson, and F. M. Hemphill. Public Health Reports. June, 1955. 70:6:554-560.

Reports a home accident prevention project in Richland County, Ohio, where rate of injuries per person-year for 114 families was reduced from 6.2 during the first week to 1.3 during the 16th week, a finding which parallels the reduction reported in a similar project in Washtenaw County, Mich. It is suggested that the method of recording injuries by families may be useful in establishing safety patterns in the home, as well as in collecting epidemiological data. The project demonstrated a cooperative approach between an official health agency and a civic organization; procedures were both economical and practicable and could be applied in any community. Data obtained concerning characteristics of accidental home injuries add to accumulating information on this problem.

AMPUTATION--OCCUPATIONAL THERAPY

779. Jones, Mary S. (Farnham Park Recuperative Home, Farnham Royal, Bucks, England)

Occupational therapy for the upper limb. Brit. J. Phys. Med. June, 1955. 18:6:119-133.

Discusses aims of treatment, types of occupations used as treatment, the problem of incentive in choosing work for rehabilitation treatment, and adaptations of equipment used in retraining. Illustrated.

AMPUTATION--PHYSICAL THERAPY

780. McComas, Margaret L. (296 Oak Ave., Clifton Heights, Pa.)

Lower extremity amputee check list, by Margaret L. McComas and Biruta E. Zimmerman. Phys. Therapy Rev. June, 1955. 35:6:305-311. Reprint.

A plan of evaluation based on personal experience in the Department of Physical Medicine and Rehabilitation of the Hospital of the University of Pennsylvania over a period of three years, in a series of amputees numbering 137, of whom 128 were unilateral above-knee amputees and 9 were bilateral. The purpose of this list was to aid in teaching amputees how to ambulate and at the same time to develop in them better motivation. Various activities which the amputee should learn to perform are enumerated in the checklist and procedures which may be employed in having the patient carry out the activities are discussed.

APHASIA

781. Lockhart, Jean D. (Children's Hosp., 2125 13th St., N. W., Washington 9, D.C.)

Childhood aphasia. Clinical Proceedings, Children's Hosp., Washington, D.C. June, 1954. 10:6:111-114. Reprint.

Contains a case history of a 7-year old girl who is severely damaged organically with a number of types of aphasia involved. Her hearing, visual, and spatial relationships are affected, all a part of a pattern of organic brain damage of unknown etiology. A discussion of childhood aphasia by Dr. William M. Hart follows the case history.

782. Winchester, Richard A. (Ft. Miley V. A. Hospital, San Francisco, Calif.)

Auditory dedifferentiation in the dysphasic, by Richard A. Winchester and Bernard T. Hartman. J. Speech and Hearing Disorders. June, 1955. 20:2:178-182.

"The results of this study make it possible to conclude that there is a breakdown in auditory differentiating ability in the brain-injured person; and that in company with other extroceptive functions, figure-ground differentiating ability in auditory perception is also disturbed by the presence of a central nervous system lesion with no significant lessening of auditory acuity necessarily being present...."-Conclusions.

See also 877.

ART

783. School Arts. Mar., 1955. 54:7

Title of issue: Art and the exceptional child.

Partial contents: The creative process and the handicapped child, Viktor Lowenfeld. -Art for gifted pupils, Charles D. Gaitskell. -Retarded children need art, Jacquelyn White Baskin. -Art for the blind, Carolyn W. Heyman. -Art therapy in mental illness, Richard V. Freeman and Irwin Friedman. -Art and the adolescent deaf girl, Clair G. James. -Art and the socially maladjusted, Markand Bhatt. -Editorial: Nobody is normal.

A series of articles discussing the meaning of art education for those with varied handicaps; self-confidence, independence and satisfaction are gained through their own creative achievements.

This issue available from School Arts, 72 Printers Building, Worcester 8, Mass., at 75¢ a copy.

ARTHRITIS--MEDICAL TREATMENT

784. Lowman, Edward W. (400 E. 34th St., New York 16, N. Y.)

Rehabilitation of the patient with chronic rheumatoid arthritis; a two-year study. J. Chronic Diseases. June, 1955. 1:6:628-637.

Results of an informal study of a pilot group of patients, all severely crippled with rheumatoid arthritis in the active stage at Bellevue Hospital, New York City, were so favorable that a full-scale research project was begun in 1951 at Goldwater Memorial Hospital to study the problem more thoroughly. The present report is based on the findings of the first two years' study with the latter group. A total of 38 patients were treated with a combination of medical and rehabilitation measures. Data and conclusions of the study so far indicate that broad rehabilitation measures offer hope that the patient crippled with active rheumatoid arthritis can be salvaged from total invalidism. Patients are being followed for an additional three-year period to verify this inference.

ASPHYXIA

785. Apgar, Virginia (622 W. 168th St., New York 32, N. Y.)

Neonatal anoxia; 1. A study of the relation of oxygenation at birth to intellectual development, by Virginia Apgar (and others). Pediatrics. June, 1955. 15:6:653-662.

"In a study designed to measure the effect of delayed oxygenation of newborn infants' blood on intelligence in later life, capillary blood oxygen content or saturation was measured at various intervals in the first three hours after birth, and in the same individual subjects intelligence was later assessed by Stanford-Binet test. . . ."--Summary. Children were followed for 4 years to observe mental development, cerebral palsy or other neurological abnormalities. An incidental finding of the study is the meager value of the Gesell developmental rating of adaptive behavior, measured at approximately 2 years of age, in predicting the Stanford-Binet intelligence quotient as measured at approximately 5 years of age.

786. Corner, George W., Jr. (Dept. of Obstetrics, Johns Hopkins Hosp., Baltimore, Md.)

Fetal and neonatal anoxia and cerebral palsy. Cerebral Palsy Rev. May-June, 1955. 16:3:4-6, 24.

Explains how anoxia occurs and present trends in research in this aspect of the problem of cerebral palsy. Comparison of his own research data with similar information gathered in the 19th century by Dr. William John Little is made.

AUDIOMETRIC TESTS

787. Cutler, Harold M. (Washington Univ. Med. School, St. Louis, Mo.)

Does he hear you?, by Harold M. Cutler and Robert Goldstein. Nursing Outlook. May, 1955. 3:5:286-288.

The role of the school nurse in the hearing testing program, significant signs of hearing loss, testing methods for screening, and a comparison of group and individual methods are discussed. Recommendations for school authorities planning to set up a screening program are made, and the role of the otologist is defined.

BLIND--OCCUPATIONAL THERAPY

788. Woodring, Jesse A. (1936 Lyndale Ave., S., Minneapolis, Minn.)

Occupational therapy in the rehabilitation of the blind; pre-vocational training program, Minneapolis, Society for the Blind, by Jesse A. Woodring and Nancy J. Gregg. Am. J. Occupational Therapy. May-June, 1955. 9:3:136-138.

Utilization of the skills of occupational therapists in rehabilitation work with the adult blind is still relatively new; the experience of occupational therapists on the staff of the Pre-vocational Training Center, Minneapolis, for the past four years shows how occupational therapy is meeting the basic needs of this group.

BLIND--PERSONNEL

789. The houseparent in the residential school. New Outlook for the Blind. June, 1955. 49:6:191-212.

Contents: Our feelings concerning houseparents, Ulysses S. Jones, Mrs. O. B. Moore, and Isabel B. Baugh. -The housemother and the institution team, Emma Rasmussen. -Teachers and parents; a joint responsibility, J. M. Woolly. -The houseparents' role in home-school relations, Everett Wilcox. -A school nurse looks at houseparents' problems, Frankie M. Coleman. -Selected bibliography for houseparents of blind children, by Georgie Lee Abel and Pauline M. Moor.

BLIND--SPECIAL EDUCATION

790. Campbell, Dorothy (Pacific Oaks Friends School, 714 W. California St., Pasadena, Calif.)

Blind children in the "normal" classroom. Understanding the Child. June, 1955. 24:3:73-76, 96.

Experience in Pacific Oaks Friends Nursery School and Temple City, Calif., schools has demonstrated the value for both blind and sighted children in their policy of nonsegregation. Teaching is supplemented by special instruction suited to the individual child's handicap; the handicapped child is included in the regular classroom work wherever possible.

BRAIN INJURIES

See 785;886.

CAMPING--CONNECTICUT

791. Herzog, John D. (Camp Hidden Valley, Ridgefield, Conn.)

Boys and girls together, handicapped and able-bodied. Recreation. June, 1955. 58:6:260-261.

A report of experiences in the successful Herald Tribune Fresh Air Fund summer camp, where the handicapped and non-handicapped are integrated in a program the aims of which are social rehabilitation to provide the handicapped an opportunity to learn to live with "normal" children. The experience is equally educational for the non-handicapped. The Fresh Air Fund is an organization set up to provide country vacations to the underprivileged children of New York City.

CAMPING--NEW JERSEY

792. Finley, Esther (Dept. of Public Health Nursing, Univ. of Pittsburgh, Pittsburgh 13, Pa.)

Handicapped children can go camping. Nursing Outlook. May, 1955. 3:5:292-295. Reprint.

A description of Camp Oakhurst, Oakhurst, New Jersey, and the experiences of the writer as a camp nurse there. This particular camp is for those handicapped by cerebral palsy, orthopedic accidents, or poliomyelitis, with over 65 per cent of the campers being cerebral palsied. Details of the pre-camp meeting for staff, the program planned for children with physical limitations, the medical routine and a typical day at camp are given.

CANCER--SOCIAL SERVICE

793. Smith, Gertrude M. (1541 Kings Highway, Shreveport, La.)

The medical-social needs of cancer patients. Louisiana Welfare. Apr., 1955. 15:2:4-6, 19.

An interpretation of the medical-social needs of cancer patients and the role of the medical social worker in meeting them.

CEREBRAL PALSY

794. Perlstein, Meyer A. (4743 N. Drake Ave., Chicago 25, Ill.)

Infantile cerebral palsy. Chicago, Year Book Publishers, 1955. (40) p. Reprinted from: Advances in Pediatrics. Vol. VII. Chicago, Year Book Publishers, c1955.

Aspects of incidence of cerebral palsy, etiology and pathogenesis, precipitating factors, pathology, classification and clinical symptoms, associated defects, prognosis and treatment of cerebral palsy are reviewed.

See also 785; 786; 831; 838; 845; 852; 887.

CEREBRAL PALSY--DIAGNOSIS

795. Perlstein, Meyer A. (4743 N. Drake Ave., Chicago 25, Ill.)

Nature and recognition of cerebral palsy in infancy. Courrier. Feb., 1955. 5:2:80-90.

Diagnosis of cerebral palsy can be made more readily with a knowledge of the relationship between etiological factors and types of cerebral palsy, developmental rates and patterns in normal and abnormal children, frequency of occurrence of associated defects and specific symptoms, specific tests designed to elicit abnormal muscle properties and motor functions, and the differential diagnosis between mental retardation and cerebral palsy. Resumes are included in French and Spanish.

796. Thelander, H. E. (3641 California St., San Francisco, Calif.)

Pediatric evaluation of brain-damaged children. J. Pediatrics. June, 1955. 46:6:699-703.

Statistical data are from experience in the pre-nursery school program for children with cerebral palsy at Children's Hospital in San Francisco and list main and secondary diagnoses, etiological factors as determined by the history and physical findings. Also discussed are the physical development, intellectual status, emotional status, socio-economic problems of the parents of the handicapped child, and essentials of therapy.

CEREBRAL PALSY--EQUIPMENT

797. Landmesser, W. E., Jr. (Newington Home and Hosp. for Crippled Children, Newington 11, Conn.)

The opponens spacer; a device to facilitate functional opposition in the hand of the cerebral palsied or hemiplegic child, by W. E. Landmesser, Jr., Ruth C. McCrum, and John C. Allen. Am. J. Occupational Therapy. May-June, 1955. 9:3:112-114, 139.

Describes the device and indications for its use, with method of making and fitting and major variations to suit the individual patient's need. "...In the properly selected case, an adequately fitted spacer enables the child to accomplish opposition of thumb to index finger....In modified form, the spacer has been helpful to selected cases of poliomyelitis, Volkmann's ischemic contracture, and peripheral nerve injury...."

798. Van Leuven, R. M.

A stabilizer for the cerebral palsied child. Physiotherapy. May, 1955. 41:5:154-155.

A description of a stabilizer designed and produced in the Department of Physical Medicine of the Royal Free Hospital, London. The apparatus has been previously described but adaptations have been made and are illustrated and described here. It is adjustable for all age groups between five and fifteen and provides a sense of confidence in the ability to stand alone, without fear of falling.

CEREBRAL PALSY--INSTITUTIONS--IRELAND

799. McKee, C. Ray (Belfast City Hosp., Belfast, Ireland)

Malcolm Sinclair House. Almoner. June, 1955. 8:3:90-94.

Vision and Enterprise, VI.

Describes the first and only treatment center for cerebral palsy in Northern Ireland, initiated by the Northern Ireland Council for Orthopaedic Development. It operates as a day center four days a week, providing the necessary treatment services as well as educational facilities.

CEREBRAL PALSY--MEDICAL TREATMENT

800. Rosner, Samuel (Medical Arts Bldg., 1882 Grand Concourse, Bronx 57, N. Y.)

A new concept of pathology and treatment in cerebral palsy. Cerebral Palsy Rev. May-June, 1955. 16:3:10, 26.

A review of some of the work of Dr. Little and other early pioneers in this field of medical research and data on a series of 22 cerebral palsied children who have undergone craniotomy are given. All have shown some progress since the performance of surgery and others a remarkable degree of progress, making them more amenable to rehabilitation. The writer believes the procedure has definite promise and is deserving of further trial. Indications for surgery are discussed.

CEREBRAL PALSY--PHYSICAL THERAPY

801. D'Wolf, Nancy B. (998 Hope St., Providence, R. I.)

Physical therapy in the play pen. Crippled Child. June, 1955. 33:1:7-10.

The Meeting Street School in Providence, R. I., an Easter Seal agency, is one of the few places in the United States where the entire

CEREBRAL PALSY--PHYSICAL THERAPY (continued)

cerebral palsy program is oriented around the needs of the very young infant and the pre-school child. The therapeutic plan is designed to fulfill the individual developmental pattern of young growing cerebral palsied children. The writer, who is physical therapist at the School, describes for parents some of the activities and exercises which they can employ at home to strengthen the child's developmental skills. Basic skills in gross patterns can be developed in children with parents' aid; abnormal performance patterns and their correction are the concern of professional personnel.

CEREBRAL PALSY--PROGRAMS

802. Lesser, Arthur J. (U.S. Children's Bur., Washington 25, D.C.)

Progress in service for children with cerebral palsy. Cerebral Palsy Rev. May-June, 1955. 16:3:8-9, 27.

In a speech given at the annual meeting in 1954 of United Cerebral Palsy Associations, Dr. Lesser reviewed progress made by Federal and State agencies in providing services for cerebral palsied children and pointed out the need for a variety of community programs to enable these children to live at home.

CEREBRAL PALSY--PSYCHOLOGICAL TESTS

803. Allen, Robert M. (5500 S. W. 6th St., Miami 44, Fla.)

Suggestions for the adaptive administration of intelligence tests for those with cerebral palsy; Part I. Administration of the Ammons Full-Range Picture Test, Columbia Mental Maturity Test, Raven's Progressive Matrices and Leiter International Performance Scale, by Robert M. Allen and Marjorie G. Collins. Cerebral Palsy Rev. May-June, 1955. 16:3:11-14, 25.

In same issue: Problems encountered in the psychometric examination of the child with cerebral palsy, by H. Michal-Smith, p. 15, -Intelligence test performance of "athetoid" and "spastic" children with cerebral palsy, by Elias Katz, p. 17.

Methods of adapting four standardized intelligence tests are discussed; they are the ones most frequently used in the United Cerebral Palsy Clinic in Miami.

The other two articles in this psycho-diagnostic series are concerned with a discussion by Dr. H. Michal-Smith of the various psychological and emotional aspects of the life of the cerebral palsied child and data (by Dr. Elias Katz) showing that there is no statistical difference between the performance of groups of equated spastic and athetoid children on the Stanford-Binet Intelligence Scale.

804. Perlstein, Meyer A. (4743 N. Drake Ave., Chicago 25, Ill.)

Infantile spastic hemiplegia; III. Intelligence, by Meyer A. Perlstein and Philip N. Hood. Pediatrics. June, 1955. 15:6:676-682.

"In previous papers the results of a study of 334 patients with infantile spastic hemiplegia were presented with respect to age distribution, race, sex, presence of seizures, side of involvement, and time of onset (whether congenital or postnatally acquired). The present paper describes the manner in which these factors were related to intelligence in the same group...." Subjects of the series were retarded approximately 20 I.Q.

CEREBRAL PALSY--PSYCHOLOGICAL TESTS (continued)

points below normal individuals. Marked difference from recent reports of Hohman and others reporting consecutive series of cerebral palsied patients is attributed to the selective population of the present study.

CHILDREN--GROWTH AND DEVELOPMENT

805. Senn, Milton J. E. (14 Davenport Ave., New Haven, Conn.)

Common problems of sickness and growth. Child Study. Summer, 1955. 32:3:14-20.

A discussion of some of the changes and stages in children's growth which affect parents' attitudes and feelings, the impact of illness and the problems of convalescence. The physician's role in helping parents work through their problems is explained.

CHILDREN--INSTITUTIONS--PERSONNEL

See 789.

CHILDREN'S HOSPITALS

806. American Orthopsychiatric Association (1790 Broadway, New York 19, N.Y.)

The hospitalized child; Round Table, 1954. Reynold A. Jensen, M.D., Chairman. Am. J. Orthopsychiatry. Apr., 1955. 25:2:293-318.

Contents: A pediatric-child psychiatry program for the benefit of the hospitalized child, Elizabeth A. Brenner. - The interrelationship of clinical psychology and pediatrics, Jane W. Kessler. - The contribution of social case-work, Marion J. Barnes. - The contribution of social group work, Constance Impallaria. - The contribution of the child therapist to social service, Alice R. Rolnick.

A group of papers showing the relation between pediatrics and psychiatry in the Western Reserve Medical School and the University Hospitals of Cleveland.

807. California. Children's Hospital of the East Bay, Oakland (5105 Dover St., Oakland 9, Calif.)

Going to the hospital. Oakland, The Hospital, c1951. n.p. illus. 25¢.

A booklet written to assist parents in preparing the young child for hospitalization. One page is devoted to information for parents, the remainder tells in picture and simple story what the child may expect. The illustrations are similar to those found in children's coloring books and may be used in this manner to familiarize the child with details of the experience.

CHRONIC DISEASE--PROGRAMS

808. Commission on Chronic Illness (615 N. Wolfe St., Baltimore 5, Md.)

The Commission adopts further recommendations on care of the long-term patient. Chronic Illness News Letter. June, 1955. 6:6:(1-10).

Covers additional conclusions and recommendations formulated by the Commission at their April, 1955, meeting on aspects of coordination and integration of long-term care, personnel and education, research and financing. Revisions to conclusions previously adopted are incorporated in this report, as well as previously published conclusions and recommendations on care of the long-term patient. These will serve as the framework for the Commission's forthcoming report.

CLEFT PALATE

809. Subtelny, J. Daniel (Natl. Institute of Dental Research, Natl. Institutes of Health, Bethesda, Md.)

The significance of early orthodontia in cleft palate habilitative planning. J. Speech and Hearing Disorders. June, 1955. 20:2:135-147. Reprint.

Explains the contribution the orthodontist can make toward improving the configuration of the oral cavity, and indirectly, the speech potential of the cleft palate child. The necessity for orthodontia, when it should be begun, and what can be expected in terms of total cleft palate habilitation are shown.

COMMUNITY CHESTS AND COUNCILS--FINANCE

810. Community Chests and Councils of America (345 E. 46th St., New York 17, N.Y.)

Budgeting; a manual on policies and procedures. New York, The Chests, 1955. 44 p. (Bul. no. 180)

A complete revision of the original manual, first published in 1931 and revised in 1946, incorporating experience gained during recent years in Chest and Fund budgeting. The booklet describes what is generally considered to be good practice in budgeting agencies in federation but is not a statement of universally accepted procedures or even the "average" situation. It serves as a guide to general principles against which local communities can check their own practices.

CONGENITAL DEFECT

811. Dent, John H. (3439 Prytania St., New Orleans, La.)

Surgically correctable congenital anomalies encountered in early infancy; a clinico-pathological study, by John H. Dent and Herbert H. Robinson. J. La. State Med. Soc. June, 1955. 107:6:231-238.

Analyzed briefly from a study of a large group of autopsies are the more important anomalies that may be encountered in early infancy. Many of the patients (23 per cent) had multiple anomalies, any one of which could have been fatal. In clinical practice, the authors believe, however, that a surprisingly large number of infants with a single anomaly are encountered; these could be corrected if diagnosis is made promptly.

CONVALESCENCE--INSTITUTIONS

See 881.

CONVALESCENCE--INSTITUTIONS--CALIFORNIA

812. California. State Department of Public Health (Bur. of Health Education, 2151 Berkeley Way, Berkeley 4, Calif.)

Nursing homes in California. California's Health. May 15, 1955. 12:22:173-176.

A report of a survey on nursing homes, prepared by the Bureau of Hospitals of the California State Dept. of Public Health. It is part of the survey of nursing care institutions conducted by the Commission on Chronic Illness with the assistance of the U.S. Public Health Services to secure facts on which a better understanding of nursing homes and the part they play in the care of the chronically ill can be based. California was one of 12 states participating in the survey. Information in this report covers

CONVALESCENCE--INSTITUTIONS--CALIFORNIA (continued)

types and characteristics of patients in nursing homes in California, as well as type, size, ownership, and staffing of homes accomodating these patients.

DEAF--PERSONNEL

813. Brill, Richard G. (S. Calif. School for the Deaf, Riverside Calif.)

A survey of credential requirements for teachers of the deaf in the United States. Am. Annals of the Deaf. May, 1955. 100:3:321-329.

Pertinent information on state certification requirements for teachers of the deaf, on certification by the Conference of Executives of American Schools for the Deaf, and on minimum requirements. Requirements for teachers of the deaf in day schools have been analyzed by state.

DEAF--SPECIAL EDUCATION

814. Gruver, Margaret H. (520 Hope St., Providence 6, R.I.)

Educating the profoundly deaf child. Volta Rev. June, 1955. 57:6: 243-247.

An article concerned with the child who is so severely deaf that he is unable to understand speech through hearing, with special emphasis upon those who have almost no hearing, or none, in the speech range. The author discusses the speech potential, language problems, abstract concepts, social isolation, and interpersonal relationships. Needs of the profoundly deaf child are stated.

815. Points, Betty Low (Box 356, Rochester, Minn.)

Handbook for living. Rochester, Minn., The Author (1955). 58 p. illus. Multilithed. Paperbound. \$1.00.

A book of stories written to supply the conversation for oral or written language necessary for most everyday activities within the experience of children and adults. It is intended to be used as a model for writing, speech and speech reading by the deaf, foreign, retarded or normal person.

DENTAL SERVICE

See 809.

DIABETES--MENTAL HYGIENE

816. Falstein, Eugene I. (25 E. Washington St., Chicago 2, Ill.)

Juvenile diabetes and its psychiatric implications, by Eugene I. Falstein and Ilse Judas. Am. J. Orthopsychiatry. Apr., 1955. 25:2:330-342.

Reviews briefly the literature dealing with the relationship of emotions and diabetes mellitus. Case reports and treatment of two diabetic children presenting markedly differing clinical manifestations are given in some detail. "... The matter of early diagnosis of psychosomatic disease and its somatic management is discussed from the standpoint of the prevention of the development of the pathological mother-child relationship that often makes the cure much worse than the disease. Finally, no evidence of so-called specificity involving the relationship of emotion and the somatic illness could be shown."--Summary.

EDUCATION--ADMINISTRATION

817. Anderson, Robert H. (Harvard Univ. Graduate School of Education, Cambridge, Mass.)

Ungraded primary classes; an administrative contribution to mental health. Understanding the Child. June, 1955. 24:3:66-72.

Points out the remarkable success of ungraded primary classes in Milwaukee and in Park Forest, Ill. especially, the advantages of the system for meeting the individual child's needs, the problems of children which the graded system aggravates, and how the ungraded class differs from the graded.

ELECTROENCEPHALOGRAPHY

818. Bickford, Reginald G. (Dr. Keith, 102-110 2d Ave., S. W., Rochester, Minn.)

Electroencephalography in pediatrics, by Reginald G. Bickford and Haddow M. Keith. Quart. Rev. of Pediatrics. May, 1955. 10:2:69-78.

The role of the EEG in terms of practical diagnostic labeling of the patient is discussed; in certain instances this procedure gives a more subtle insight into the mechanism of seizures than can be obtained by purely clinical observation. Various situations in pediatric practice in which the electroencephalogram has proved useful are mentioned and further possibilities for its use are expected.

EMPLOYMENT

819. Barnes, Wendell B.

Job opportunities for handicapped in small business. Performance. June, 1955. 5:12:7-9.

Tells of the services of the Small Business Administration, how it encourages the hiring of the physically handicapped by small business concerns, the success of its program and its counseling efforts in behalf of small business problems.

EPILEPSY--PSYCHOLOGICAL TESTS

820. Keith, Haddow M. (102-110 Second Ave., S. W., Rochester, Minn.)

Mental status of children with convulsive disorders, by Haddow M. Keith (and others). Neurology. June, 1955. 5:6:419-425.

A report on the mental status of children with convulsive disorders and the possible relation of mental retardation to such factors as type of convulsive disorder, etiologic factors, age at onset of convulsive attacks, and the relation of the electroencephalographic findings to mental retardation and clinical diagnosis. Two hundred and ninety-six children were rated as to mental retardation. On the basis of the findings, no specific type of electroencephalographic tracing appeared characteristic of any one clinical type of convulsive disorder.

EXERCISE

821. New York. New York University-Bellevue Medical Center. Institute of Physical Medicine and Rehabilitation (400 E. 34th St., New York, N. Y.)

Hypokinetic disease; role of inactivity in production of disease, by Hans Kraus (and others). New York, The Institute (1955?). (30) p. illus. Mimeo.

Illustrates the six tests of key muscle groups (Kraus-Weber tests), graphs showing incidence of failure of school children to pass these tests,

EXERCISE (continued)

the effects of sedentary living on physiology and its relation to various disease states. The treatment and prevention of physical inactivity are stressed. Includes a bibliography of 47 items.

HAND

822. Doescher, Marietta (222 St. Peter St., Gonzales, Texas)

Training in the use of the functional assist for the flail hand, by Marietta Doescher and Odon F. Von Werssowetz. Am. J. Occupational Therapy. May-June, 1955. 9:3:115-117.

Gives a description of the device and the training methods devised for one patient in its use. At the time of the patient's discharge, she was able to perform many of the activities of daily living as well as recreational activities such as crafts, card playing, drawing, and reading (turning the pages of the book).

See also 797.

HANDICAPPED--FICTION

See 887.

HEALTH EDUCATION

823. Skinner, Mary Lou (Regional Office, U.S. Dept. of Health, Education and Welfare, 42 Broadway, New York 4, N.Y.)

Health education for outpatients, by Mary Lou Skinner and Mayhew Derryberry. Hospitals. June, 1955. 29:6:69-70.

Discusses the "therapeutic" process of helping people to recognize things for themselves, as applied to health education for outpatients, and some of the methods used in various clinics to disseminate information, including health education publications and group meetings.

HEALTH SERVICES

824. American College Health Association

Teamwork in meeting the health needs of college students; proceedings, Fourth National Conference on Health in Colleges, held in conjunction with the thirty-second annual meeting of the... May 5-8, 1954. n.p., The Assn., 1955. 211 p.

Contains the main talks and committee reports of the Conference, dealing with administrative, organizational, and functional aspects of the college health service. Of special interest are the talk by Howard A. Rusk, M.D., on "Implications of Advances in the Health Sciences to Education in College," and a section on students with special health problems.

This publication is a companion volume and to some extent furnishes the base for a more definitive treatment included in a book concerning the present status of student health in the United States, written by Mrs. Ethel Ginsburg and scheduled for September publication by the National Tuberculosis Association.

HEART DISEASE

825. Middleton, William S. (1300 University Ave., Madison 6, Wis.)

The care of the cardiac patient; retrospect and prospect. Missouri Med. June, 1955. 52:6:429-434.

Titled "A Postgraduate Review," this article reviews techniques of the

HEART DISEASE (continued)

physical examination of patients with cardiovascular complaints, the use of electrocardiography, therapy for cardiac patients, and the place of surgery in heart disease.

HEMIPLEGIA

See 822; 877

HEMIPLEGIA--MEDICAL TREATMENT

826. Neu, Harold N. (324 City Natl. Bank Bldg., Omaha, Neb.)

Rehabilitation of the hemiplegic, by Harold N. Neu and Harold A. Ladwig. Nebraska State Med. J. Oct., 1954. 39:10:415-418. Reprint.

"Some of the problems of rehabilitation of the cerebrovascular accident have been discussed. Early evaluation and therapy at the bedside is recommended. Emphasis is placed on the need of auxiliary services in a team-approach to the problem of rehabilitation of the hemiplegic; yet the physician must be the key figure in directing the entire program."--Summary.

827. Van Buskirk, Charles (Univ. of Minnesota Hosps., Minneapolis 14, Minn.)

Prognostic value of sensory defect in rehabilitation of hemiplegics. Neurology. June, 1955. 5:6:407-411.

"In a series of 35 hemiplegic patients, evidence of persistent sensory loss could be correlated with a poor prognosis for rehabilitation and length of hospitalization. Eighty per cent of the patients revealed a disturbance of sensation. Vibratory sense, two-point discrimination, and pain sensation were all impaired in about equal frequency. Two-point discrimination returned to normal first (average one and a half months) and most often. Vibratory sense and pain sensation returned later (average four and three-eighths months and two months, respectively) and about half as frequently as did two-point discrimination. Retraining was a factor in the return of sensory function with some patients."--Conclusions.

HEREDITY

828. Herndon, C. Nash (Dept. of Genetics, Bowman Gray School of Med., Wake Forest College, Winston-Salem, N.C.)

Heredity counseling. Eugenics Quarterly. June, 1955. 2:2:83-89.

A discussion of the types of problems presented to heredity counseling centers. Counseling families in which one or more cases of an hereditary disease have already occurred is one of the most frequent problems; the author defines the role of the counselor in handling such cases. More effective heredity counseling will be possible with new developments in research.

HOMEBOUND--EMPLOYMENT

829. Baer, Max F.

How to make handicrafts pay. J. Lifetime Living. July, 1955. 21:1:53-58.

A discussion of some of the pitfalls to avoid in marketing handicraft articles, suggestions for sources of ideas on design, advantages of various ways of marketing the product, and the best ways of advertising one's wares.

HOSPITALS--FINANCE

See 830.

INSURANCE (HEALTH)

830. Ogg, Elizabeth

Footing the hospital bill. New York, Public Affairs Committee, c1955. 28 p. (Public Affairs pamphlet no. 222)

A popular summary of a three-volume study of the Commission on Financing Hospital Care, with its recommendations. It covers an evaluation of the effectiveness of voluntary prepayment for the hospital, the community, and the public; a study of improved methods of financing hospital care for groups unable to afford prepayment or pay for care in any way; and an appraisal of the elements of hospital cost and methods for controlling them.

Available from Public Affairs Committee, 22 E. 38th St., New York 16, N. Y., at 25¢ a copy.

JAUNDICE

831. Lund, Mogens (Dept. of Neurology, Odense County and City Hosp., Odense, Denmark)

Kernicterus; a clinical and pathological study of two late cases.

Acta Psych. et Neurol. Scand. 30:1-2:265-280. Reprint.

"The clinical and pathological findings in two late cases of kernicterus are described in detail and compared with 15 cases in the literature.... Pathogenetic problems are discussed...."--Summary. Includes a bibliography of 59 references.

LATERALITY

832. Bauer, Robert W. (V. A. Hospital, Sheridan, Wyo.)

Lateralization of cerebral functions, by Robert W. Bauer and Joseph M. Wepman. J. Speech and Hearing Disorders. June, 1955. 20:2:171-177.

"The reported results have some implications for a general hypothesis concerning brain function. Cerebral dominance seems unique to the left hemisphere. Those... who lack consistent left hemispheric dominance do not appear to have consistent right hemispheric dominance except in rare instances...." The authors suggest the individuals commonly regarded as left-handed are more likely to be ambidextrous and people in whom lateralization has not fully developed. Language functions show a similar cortical development. Intellectual functions not involving language appear to be particularly impaired with right-hemisphere lesion.

MENTAL DEFECTIVES--EMPLOYMENT

See 870; 878.

MENTAL DEFECTIVES--SPECIAL EDUCATION

833. Brown, Frederick W. (Sewanhaka High School, Floral Park, N. Y.)

A psychotherapeutically-oriented coeducational program for mentally-retarded adolescents in a comprehensive high school. Mental Hygiene. Apr., 1955. 39:2:246-270. Reprint.

Describes a four-year schedule, the product of two year's experimentation, for overage mentally retarded children who have been retained in the elementary schools but, under the program, are sent to high school for special class instruction. Discussed are the emotional problems of the various types of children included in special classes, psychotherapeutic methods applied to situations arising in class, and attitudes of the teacher-therapist.

MENTAL DEFECTIVES--SPECIAL EDUCATION (continued)

834. Goldstein, Arnold (Public School 287, Brooklyn N. Y.)

Structuring the limits in classes for the mentally handicapped in low socio-economic areas. Understanding the Child. June, 1955. 24:3:83-84, 86.

Educable mentally handicapped children, the author believes, are more apt to be found in low socio-economic areas and present not only the problem of mental retardation but that of hostile behavior as well. By structuring the limits of the curriculum and classroom rules, the teacher can eliminate feelings of insecurity in these children and, at the same time, offer the child assistance in maintaining self control which is necessary to his occupational educational training.

MENTAL DEFECTIVES--SPECIAL EDUCATION--GREAT BRITAIN

835. Ferguson, T. (6 University Gardens, Glasgow, W. 2, Scotland)

After-histories of girls educated in special schools for mentally-handicapped children, by T. Ferguson and Agnes W. Kerr. Glasgow Med. J. Feb., 1955. 36:50-56. Reprint.

A report of a follow-up study of 207 young women now 22 years of age who had been educated in special schools in Glasgow. Data on home environment, working status of fathers, other handicaps, marital status, and employment status are given. Under present conditions in Glasgow the employment of mentally retarded girls does not present as much difficulty as that of physically handicapped girls, but many may present grave social problems.

MENTAL DISEASE--OCCUPATIONAL THERAPY

836. Shalik, Harold (103 E. 14th Ct., Des Moines, Iowa)

Refining the use of OT with the lobotomized patient. Am. J. Occupational Therapy. May-June, 1955. 9:3:118-120, 143.

Explains types of behavior to be anticipated in patients after lobotomy and their significance to the practice of occupational therapy. General principles underlying an activity program for lobotomized patients have been discussed and methods of scheduling, group dynamics, organizing the occupational therapy clinic, and advancement of the program are considered. The program should be based on the principles of occupational therapy for psychiatric patients.

MENTAL DISEASE--PERSONNEL

See 882; 883.

MENTAL HYGIENE

837. Wexler, Milton (Menninger Foundation, Topeka, Kan.)

Mental hygiene; goal for all. Crippled Child. June, 1955. 33:1:18-20.

Dr. Wexler discusses the psychological impact of disease and physical handicaps, attitudes of parents and unaffected brothers and sisters, and the adjustment of the handicapped child to his illness.

MULTIPLE HANDICAPS--EMPLOYMENT

838. Lauber, Ellyn G. (The Training School, Vineland, N. J.)

The vocational placement of a mentally retarded boy; a case history. Training School Bul. May, 1955. 52:3:43-49.

The case history of a feeble-minded boy with mildly crippling cerebral palsy, it portrays what was achieved by two persistent and accepting parents

MULTIPLE HANDICAPS--EMPLOYMENT (continued)

who kept their child at home. With help they have succeeded in partially solving the many problems of a multiple handicapped child. A medical report has not been included in this case history.

MULTIPLE SCLEROSIS

839. McAlpine, Douglas (Middlesex Hosp., London, England)

The clinician and the problem of multiple sclerosis. Lancet. May 21, 1955. 268:6873:1033-1038.

Reviews briefly surveys of the disease and discusses aspects of the natural history of multiple sclerosis, features of early symptomatology, the allergic theory, the course of the disease, and treatment.

MULTIPLE SCLEROSIS--MEDICAL TREATMENT

840. Brickner, Richard M. (1000 Park Ave., New York 28, N. Y.)

Phenomenon of relief by flush in multiple sclerosis. Arch. Neurology and Psychiatry. Feb., 1955. 73:2:232-240. Reprint.

Describes the phenomenon termed "relief by flush" which has now been demonstrated with 264 symptomatic phenomena in 86 patients. It is believed that it represents a specific factor in the pathogenesis of the lesions. Results and conclusions are given; the procedure differs entirely from other uses of vasodilating drugs in multiple sclerosis.

MUSCULAR DYSTROPHY--DIAGNOSIS

841. Lewitan, Alexander (Jewish Chronic Diseases Hosp., Rutland Rd. & 49th St., Brooklyn 3, N. Y.)

The roentgen features of muscular dystrophy, by Alexander Lewitan and Louis Nathanson. Am. J. Roentgenology, Radium Therapy and Nuclear Med. Feb., 1955. 73:2:226-234. Reprint.

"This report is concerned with the roentgen features of muscular dystrophy as seen by us over a period of fifteen years in 35 patients. Our material consists mostly of advanced cases, requiring institutional care...."
--(Authors' introduction). The article has ten illustrations.

MUSCULAR DYSTROPHY--MEDICAL TREATMENT

842. Milhorat, A. T. (55 W. 11th St., New York 11, N. Y.)

Therapy in muscular dystrophy. Med. Annals of the District of Columbia. Jan., 1954. 23:1:15-22. Reprint.

Explains the symptoms of the disease, types of dystrophy, the experience with various drugs in treatment, and research being conducted to determine effective therapy. The importance of emotional reactions of the patient with muscular dystrophy is discussed, as well as the use of physical therapy.

MUSIC

843. Allen, Elizabeth P.

Let there be music. Crippled Child. June, 1955. 33:1:11-15.

A volunteer worker with crippled children spends three days a week teaching music at the Children's Rehabilitation Center, Rutland, Vt. The music program and its modifications for various physical limitations are described and the social values of the program are discussed. Ear-training aids the hard of hearing and rhythmic work is beneficial to the various

MUSIC (continued)

types of cerebral palsy handicaps. The music teacher is an important member of the therapeutic team attempting to solve the social, educational, and emotional problems of the patients.

844. California. California School Supervisors Association, Southern Section Music for children with special needs; Frances Cole, Chairman, Music Professional Committee. El Monte, Calif., The Assn. (1955?). 29 p.

A handbook designed to help teachers of children with special needs--the cerebral palsied, mentally retarded, deaf and hard of hearing, the blind and partially seeing--plan music experiences especially adapted to their limitations. Material suited to the particular problems of each group are suggested, with ways of presentation and use of the material. Included are a bibliography of music texts, of recording sources, recommended equipment, and recorded albums, as well as recommended songs for a variety of uses.

Available from Frances Cole, 200 S. Lexington Ave., El Monte, California, at \$1.00 a copy, plus 5¢ postage.

NEUROLOGY

845. Bobath, Berta (Cerebral Palsy Center, 3 Park Crescent, London, W. 1, England)

The treatment of motor disorders of pyramidal and extra-pyramidal origin by reflex inhibition and by facilitation of movements. Physiotherapy. May, 1955. 41:5:146-153.

Congress Lecture-Demonstration.

Describes typical patterns of muscle action in patients with varied types of brain lesions, causes of abnormal motor patterns, and discusses the coordination of reflex activity at the various levels of the central nervous system. Principles of treatment are described and a special technique of manipulation and its variations for the different types of cases are considered.

See also 847.

OLD AGE--MEDICAL TREATMENT

846. J. Michigan State Med. Soc. May, 1955. 54:5:545-573.

Papers from the Conference on Gerontology for Physicians, Ann Arbor, Michigan, January 13-15, 1955.

Contents: Geriatrics and the aging personality, C. Howard Ross. -Geriatrics and the general practitioner, Charles Sellers. -Circulatory diseases of old age, Paul S. Barker. -Periodic health appraisal in the aged, W. S. Reveno. -The physician's role in community health problems, Vlado A. Getting. -Suggestions from the Conference on Gerontology, A. Hazen Price. -Senescence, an eyeful, John M. Dorsey.

PARALYSIS

847. Ayres, A. Jean (1321 E. 19th St., Santa Monica, Calif.)

Proprioceptive facilitation elicited through the upper extremities: Part I. Background; Part II. Application; Part III. Specific application to occupational therapy. Am. J. Occupational Therapy. Jan.-Feb., Mar.-Apr., May-June, 1955. 9:1, 2 & 3. 3 pts. Reprint.

Explains the principles of proprioceptive facilitation, the application

PARALYSIS (continued)

of these principles, and the writer's analyses of the methods and techniques in occupational therapy which involve the various proprioceptive facilitatory mechanisms. Only the upper extremities are considered. Some of the analyses are of methods and equipment found in the literature but not analysed there in terms of proprioceptive facilitation.

The three articles are abstracted from a paper presented to the department of occupational therapy of the University of Southern California in partial fulfillment of the requirements for the M.A. degree; the graduate study was made possible by a scholarship from the California Elks Association.

PARAPLEGIA

848. Talbot, Herbert S. (VA Hosp., West Roxbury, Mass.)

The sexual function in paraplegia. J. Urology. Jan., 1955. 73:1:91-100. Reprint.

"...Considering the sexual manifestations as a whole it is apparent that the popular belief that all of these men are totally inadequate is unjustified. In view of the survival of a number of the components which go to make up the total function, it is possible, by careful study and treatment of the individual patient, to develop a reasonably satisfactory type of sexual activity. This has already been done in a number of instances and should be done in a great many more. Its importance to the patient's rehabilitation and well-being requires no emphasis."--Summary. An earlier paper reported on the sexual function in paraplegia, largely in terms of its neuromuscular manifestations, and reviewed briefly the neurophysiology involved. The present discussion amplifies this by observations on 208 patients in addition to the 200 originally studied.

PARAPLEGIA--FICTION

See 887.

PARAPLEGIA--MEDICAL TREATMENT

849. Zankel, Harry T. (Crile V.A. Hosp., Cleveland 29, Ohio)

Recovery of muscle function in paraplegia, by Harry T. Zankel and Leontine H. Carrington. Physical Therapy Rev. June, 1955. 35:6:299-305. Reprint.

"A study has been made of 5,688 muscles or muscle groups in 79 patients. It has been shown that recovery of muscle function in paraplegia occurs in zero and weak muscles with sufficient frequency to warrant a more optimistic attitude than is frequently assumed by workers in this field. Results obtained by sustained physical and occupational therapy alone necessarily render questionable any claims for improvement produced by specific medication aimed at the spinal cord. For such claims to be of any value, the results must be much better than here reported to be of statistical significance."--Summary.

PARENT EDUCATION

See 823.

PARTIALLY SIGHTED

850. Guibor, George P. (30 N. Michigan Blvd., Chicago, Ill.)

Practical points for determining subnormal vision (amblyopia) in children and infants with cerebral palsy. Cerebral Palsy Rev. May-June, 1955. 16:3:7, 27.

Dr. Guibor presents a new diagnostic tool in ophthalmic examination for cerebral palsied children and stresses the necessity for early diagnosis of visual problems in cerebral palsy since they may retard progress in locomotion, speech, and manual dexterity as well as become a barrier to academic learning and proper interpretation of environment. This text will aid the examiner to ascertain the presence of a visual defect or subnormal vision; referral to an eye doctor interested in children's eye diseases and their associated anomalies is then in order.

PEDIATRICS

851. Phillips, H. T. (Univ. of Cape Town, Cape Town, S. Africa)

Some social aspects of pediatrics, by H. T. Phillips and Eva J. Salber. South African Med. J. May 21, 1955. 29:21:499-503.

A discussion of the importance of the social environment on the development of the healthy individual and on the pathogenesis of his diseases. Such factors as maternal deprivation, hospitalization, community disorganization, and the effects of physical handicapping are considered.

PHYSICAL EFFICIENCY

852. Miller, Anne S. (N. Y. State Rehab. Hosp., West Haverstraw, N. Y.)

An evaluation method for cerebral palsy, by Anne S. Miller (and others). Am. J. Occupational Therapy. May-June, 1955. 9:3:105-111.

Describes a motor development test used for the upper extremities in determining a treatment program. The present test has been in use for the past year at the New York State Rehabilitation Hospital and is the fourth revision of previous tests, incorporating the best features of each along with new items not previously covered. Items composing both this test and one used in the physical therapy department were taken directly from studies published by Dr. Arnold Gesell and his associates at the Yale Clinic of Child Development. It tells what may be expected of any child of a certain age and what he cannot be expected to do, aiding the doctor in evaluating rate of progress and in determining the ultimate prognosis of the patient. A sample of the test and scoring sheet are included.

PHYSICAL THERAPY--ADMINISTRATION

853. Rodriguez, Arthur A. (55 E. Washington, Chicago 2, Ill.)

Set realistic charges for physical therapy, by Arthur A. Rodriguez and Alfred Rodriguez. Hospitals. June, 1955. 29:6:88, 90, 92. Reprint.

Also in: Physical Therapy Rev., June, 1955 (35:6:295-298), under title: A schedule of charges for physical therapy services.

The authors, a clinical associate professor of physical medicine and a certified public accountant, present some of the principles of cost estimation in the physical therapy department, review some of the prevailing schedules of charges, and suggest some formulae that may aid in establishing charges in any situation.

POLIOMYELITIS--EQUIPMENT

See 797; 822.

POLIOMYELITIS--MEDICAL TREATMENT

854. Dail, Clarence W. (Rancho Los Amigos Respiratory Center for Poliomyelitis, Hondo, Calif.)

Clinical aspects of glossopharyngeal breathing; report of use by one hundred postpoliomyelitic patients, by Clarence W. Dail, John E. Affeldt, and Clarence R. Collier. J. Am. Med. Assn. June 11, 1955. 158:6:445-449.

Describes a method of breathing which consists essentially of pumping air into the lungs with the aid of the mouth and throat structure instead of the use of the normal breathing muscles. Advantages of the method are noted; it has been found also to be of great help in aiding the return of natural breathing. Five case histories are reported and findings of a study of 100 patients who have used the method are given.

855. Dail, Clarence W. (Rancho Los Amigos Respiratory Center, Hondo, Calif.)
A manual of instruction for glossopharyngeal breathing, by Clarence W. Dail, Miriam Zumwalt, and Hazel Adkins. Hondo, Calif., The Authors, 1955. 17 p. illus. Mimeo.

A description of the technique of glossopharyngeal breathing, a substitute method of breathing that can be used to produce adequate respiratory ventilation when there is paralysis of the respiratory muscles. Indications and contraindications for its use are explained and the medical, social and economic advantages of the method outlined. Detailed instructions for teaching glossopharyngeal breathing are given.

856. Wilson, James L. (1313 East Ann St., Ann Arbor, Mich.)

Prevention of long-time dependence of poliomyelitis patients on tank respirator, by James L. Wilson and David G. Dickinson. J. Am. Med. Assn. June 18, 1955. 158:7:551-555.

Outlines a broad general program for freeing the respirator patient from dependence on the tank type respirator. Experience in the respirator center at the University of Michigan, where patients are chosen for the most part because of chronicity and severity of involvement, is summarized. Psychological factors influencing need for the respirator are discussed.

POLIOMYELITIS--PREVENTION

See 880.

POLIOMYELITIS--SPEECH CORRECTION

857. Morley, D. E. (210 Buena Vista, Ann Arbor, Mich.)

Speech disorders resulting from bulbar poliomyelitis. J. Speech and Hearing Disorders. June, 1955. 20:2:156-164. Reprint.

A review of the clinical signs of bulbar poliomyelitis, its potential effects on speech production, procedures of speech examination, recovery factors, and speech therapy for these patients.

PREGNANCY

858. Hunter, James S. (102-110 2nd Ave., S. W., Rochester, Minn.)

Poliomyelitis with pregnancy, by James S. Hunter and Clark H. Millikan. Obstetrics & Gynecology. Aug., 1954. 4:2:147-154. Reprint.

A report of a study of 49 patients at the Mayo Clinic who had pregnancy complicated by acute anterior poliomyelitis. Statistics on mortality rate,

PREGNANCY (continued)

incidence of poliomyelitis and miscarriage, infant mortality, and types of the disease in both pregnant and non-pregnant patients are given. Eleven cases in which the poliomyelitis was of bulbar spinal type have been presented in detail. Obstetric management of pregnancy was based on accepted obstetric indications.

859. McCord, W. J. (Abbott Clinic Bldg., Memorial Blvd. & St. Mary's, Winnipeg, Man., Canada)

Poliomyelitis in pregnancy, by W. J. McCord, A. J. W. Alcock, and J. A. Hildes. Am. J. Obstetrics and Gynecology. Feb., 1955. 69:2:265-276. Reprint.

A report of experiences during a large epidemic, with a discussion of the incidence of poliomyelitis in pregnancy as well as the effects of one condition on the other. Subjects of the report are 51 cases admitted to the acute poliomyelitis service of the Winnipeg Municipal Hospital from July to November, 1953. "Since this paper was submitted for publication, a paper has appeared by J. S. Hunter and C. H. Millikan (Obst. & Gynec. 4:147, 1954) which corroborates the conclusions expressed here."--Addendum. (See # 858)

PSYCHIATRY

See 806; 860.

PSYCHOLOGICAL TESTS

860. Kamman, Gordon R. (1044 Lowry Med. Arts Bldg., St. Paul, Minn.)

Value of psychometric examinations in medical diagnosis and treatment, by Gordon R. Kamman and Charles Kram. J. Am. Med. Assn. June 18, 1955. 158:7:555-560.

Five tests which are particularly useful to the clinical psychologist in personality evaluation are described and their use in medical and psychiatric diagnosis evaluated. Case histories illustrating the use and value of each test are given. Tests described are the Minnesota Multiphasic Personality Inventory, the Bender-Gestalt test, the Wechsler-Bellevue Intelligence test, the Rorschach, and the Thematic Apperception Test.

PSYCHOLOGY

861. Grassi, Joseph R. (Graylyn, Winston-Salem, N.C.)

School psychological clinics: Part III. The preschool psychological clinic. N. C. Med. J. May, 1955. 16:5:171-180.

"The activities of a preschool psychological clinic have been presented in detail. The role of the parents and of the school in helping the child gain maximum success and good emotional adjustment has been included. The nature of a psychological evaluation most suited to determine school readiness has been elaborated. The results of two experimental studies with school programs for the starting pupil have been presented. The results of preschool psychological activities have demonstrated their value in helping the school, the child, and the parents."--Author's summary.

READING

862. Hobson, Cloy S.

Materials for the retarded reader, by Cloy S. Hobson and Oscar M. Haugh. Topeka, Kan., State Superintendent of Public Instruction, 1954. 21 p.

Reprinted from: Bul. of Education, Univ. of Kansas. Nov., 1953.

Examines briefly the problem presented by the retarded reader and gives a descriptive list of books which the teacher administering to the needs of retarded readers will find useful with pupils whose reading ability is two or more years below grade level or chronological age. Cost, publishers and price of the books listed are given with reading difficulty levels indicated.

Available from Adel F. Throckmorton, State Supt. of Public Instruction, Topeka, Kan.

REHABILITATION

See 885.

REHABILITATION--ADMINISTRATION

863. Wallace, Helen M. (125 Worth St., New York, N. Y.)

Use of a review committee in the evaluation of a program for handicapped children, by Helen M. Wallace (and others). Am. J. Public Health. June, 1955. 45:6:751-758. Reprint.

Describes activities and results of a review committee in a medical rehabilitation program in New York City. Data from this particular program are given and the implications of the technic of a review committee are discussed from the viewpoints of institutionalization, planning services for handicapped children in the community, need for defining the role of "convalescent institutions," and the need for considerable information concerning each institution. Evaluation of the results of the committee has resulted in a reduction in the time for review from one year to six months. Activities of the committee require no additional staff or expenditure of funds for administration of the rehabilitation program.

On p. 797 appears a commentary on Dr. Wallace's article by Dr. Samuel M. Wishik.

REHABILITATION CENTERS

864. Bennett, Robert L. (Georgia Warm Springs Foundation, Warm Springs, Ga.)

What is a rehabilitation center? Southern Med. J. Feb., 1955. 48:2:175-177. Reprint.

A discussion of the combination of a number of skills necessary to the restoration of handicapped persons to an adjusted and useful life within their environment. The central point where these skills are integrated for an efficient, effective program is the rehabilitation center.

REHABILITATION CENTERS--DISTRICT OF COLUMBIA

865. Shields, Charles D. (3604 Overlea Rd., Washington 16, D. C.)

Physical medicine and rehabilitation at Georgetown University Medical Center. Bul., Georgetown Univ. Med. Center. Jan., 1955. 8:3:90-93. Reprint.

Reviews briefly certain historical aspects of physical medicine and rehabilitation, gives a definition of physical medicine and explains its scope.

REHABILITATION CENTERS--DISTRICT OF COLUMBIA (continued)

Describes the present status of services of the Department of Physical Medicine and Rehabilitation at Georgetown University Medical Center with plans for the future of the Department. Responsibilities of the physician in the various stages of rehabilitation are defined.

REHABILITATION CENTERS--DESIGNS AND PLANS

866. Canada. Western Society for Rehabilitation (900 W. 27th Ave., Vancouver 9, B.C., Canada)

Rehabilitation centre. Vancouver, B.C., The Soc. (1955). 20 p. illus., floor plans.

Describes with illustrations and brief text the organization of the Western Society for Rehabilitation, the facilities for treatment at the Centre, both in-patient and out-patient, and the programs for patients with cerebral palsy and arthritis. Includes floor plans.

RHEUMATIC FEVER--PREVENTION

867. Biorck, Gunnar (Univ. of Lund, Sweden)

Rheumatic heart disease as a problem of preventive cardiology. J. Chronic Diseases. June, 1955. 1:6:591-600.

"Rheumatic fever and rheumatic heart disease are examined from the point of view of a health-disease continuum. Strategic points for preventive measures and early diagnosis are indicated. Preliminary results from a recent follow-up study of 1,500 rheumatic fever patients in Malmo, Sweden, are presented as illustrative arguments. Some of the difficulties and open questions provoked by this study are detailed in the text."--Summary.

SCLEROSIS

868. Spira, Ralph (Dept. of Chronic Diseases of Malben, Malben, Israel)

Disseminated sclerosis and allied spastic conditions; adrenocorticotrophic hormones in combination with physiotherapy, by Ralph Spira and Avigdor Victor Einhorn. Brit. J. Phys. Med. June, 1955. 18:6:134-137.

Reports results of an experiment conducted on a group of nine cases of disseminated sclerosis and allied conditions, in which the predominating symptom was spasticity of the limbs. Methods and results of treatment are discussed. Findings are not conclusive; most cases have shown some improvement at one stage or another but a severe relapse occurred in one case where improvement earlier was promising. No obvious relation appeared to exist between rate of improvement and type of illness or age of patient. Physiotherapy is thought to have acted only as an adjunct in re-educating functions after some relief of spasticity and oedema in the patches of sclerosis. Some patients benefitted from therapy as far as bladder function was concerned.

SCOLIOSIS

869. Carpenter, Earnest B. (401 Medical Arts Bldg., Richmond Va.)

One-stage plaster correction of scoliosis following spine fusion, by Earnest B. Carpenter and Richard H. Fisher. J. Bone and Joint Surgery. June, 1955. 37-A:3:609-614. Reprint.

The method described in this article consists in a one-stage traction cast applied approximately two weeks after surgical spine fusion. Its

SCOLIOSIS (continued)

advantages over the use of the wedged, hinged cast are enumerated and results of using the traction cast have shown more effective correction of the spinal curvature. A description of application of the cast is given, with illustrations.

SEGREGATION AND NONSEGREGATION

See 790; 791.

SHELTERED WORKSHOPS

870. National Association for Retarded Children (99 University Place, New York 3, N. Y.)

Sheltered workshops for the mentally retarded; proceedings of Conference on Sheltered Workshops, Tampa, Florida and Workshops on Sheltered Workshops, 5th annual convention. . . Boston, Massachusetts. New York, The Assn. (1955?). 48 p. \$1.00.

Contents: Introduction, Elizabeth M. Boggs. -Principles and methods of establishing; value to individuals and to communities, Salvatore G. Di-Michael. -Responsibility of public schools in preparing retarded youth for economic and social citizenship, Richard Hungerford and J. Crockett Farnell. -How business and industry look at the employment of the mentally retarded, Lawrence F. Richmond and Carl Brorein. -Labor's policy on employment of the mentally retarded and sheltered workshops, Leo Perlis for Walter Reuther. -Financing in establishing and operating sheltered workshops, Joseph T. Weingold and J. Clifford MacDonald. -How vocational rehabilitation programs can use sheltered workshops, Claude Andrews. -Placement of mentally retarded workers, Wm. J. Miller. -How the sheltered workshop can be used as a community resource by public welfare, Betty Cornette. -Current progress and necessary next steps, Salvatore G. Di-Michael. -References in rehabilitation and sheltered employment of the mentally retarded.

SOCIAL SECURITY

871. Christgau, Victor (Bur. of Old Age and Survivors Insurance, U.S. Dept. of Health, Education and Welfare, Washington 25, D. C.)

How the "disability freeze" affects hospitals. Hospitals. June, 1955. 29:6:71.

An explanation of the new provision of the Social Security Act, designed to preserve the Old Age and Survivors Insurance rights of severely disabled workers, and the role which hospitals will play in assisting those so disabled to provide medical proof of their disability.

SOCIAL SERVICE--FINANCE

872. McMillen, Wayne (1421 E. 58th St., Chicago, Ill.)

Charitable fraud; an obstacle in community organization. Social Service Rev. June, 1955. 29:2:153-171.

Discusses the problem of fraud in the field of philanthropy and methods for its prevention through investigation and dissemination of information, legislation, and exposure and prosecution. Some of the practices of fund raising open to criticism are considered. Organizations which study and evaluate national charitable drives are described briefly.

SOCIAL SERVICE--FINANCE (continued)

873. National Conference on Solicitations

Proceedings of the Second... Hotel Carter, Cleveland, Ohio, March 24-25, 1955. Cleveland, The Conference, 1955. 37 p. Planographed.

Presents a summarization of speeches and group discussions of the Conference; program topics included techniques of solicitation control and reporting, spread of the United Fund plan, corporate support of higher education, ethical and unethical fund-raising practices, historical outline of corporate philanthropy, changing attitudes toward giving, libel laws relative to unfavorable reports on charity appeals, and the recent development of corporations' philanthropic foundations. Emphasis was on principles and methods of reporting on solicitations, as it was the previous year. In addition, this year, special attention was given business and corporation contribution problems and plans.

Available from National Conference on Solicitations, Inc., 400 Union Commerce Bldg., Cleveland 14, Ohio, at \$3.00 a copy.

SOCIAL WELFARE--SURVEYS

See 890.

SPECIAL EDUCATION--INSTITUTIONS--GREAT BRITAIN

874. Bruce, C. A. Hamilton

The Trefoil School for the Physically Handicapped. Almoner. June, 1955. 8:3:86-90.

Vision and Enterprise, V.

The main object of this residential school for boys and girls unable, because of physical disability, to attend ordinary schools but who have normal mentality, is to provide educational opportunity and the means for social adjustment along with the physical care required by their special disabilities. The needs of the disabled child and the methods used to foster independence are discussed.

SPECIAL EDUCATION--PERSONNEL

See 813.

SPECIAL EDUCATION--STUDY UNITS AND COURSES

See 891

SPEECH CORRECTION

See 814.

SPEECH CORRECTION--JAPAN

875. Memoirs of Remedial Education. Apr., 1955. No. 1.

Text in Japanese. Contents: Aim and goal of remedial education, Masao Hirai. -What is a speech defective?, Masao Hirai. -Case reports of remedial instruction in speech, Kiyomatu Okuma. -Materials: Speech therapy in the United States, Tsuneo Taguchi.

Distributed by Japanese Society of Remedial Education, c/o Masao Hirai, Seibi Primary School, Horinouti, Suginami-ku, Tokyo, Japan.

STUTTERING

876. Moncur, John P. (310 Royce Hall, Univ. of Calif., Los Angeles 24, Calif.)

Symptoms of maladjustment differentiating young stutterers from non-stutterers. Child Development. June, 1955. 26:2:91-96.

Presents findings of a study made of a wide range of environmental influences upon stutterers and non-stutterers; much of the data has been reported in two previous papers by the author. This article indicates that young stutterers on the whole display several symptoms of maladjustment other than stuttering itself. Stutterers averaged more than twice as many symptoms of maladaptive behavior as did the non-stutterers, indicating that the problem of stuttering is much more widespread than just one of speech alone. Glasner's earlier report is confirmed by the findings of this study.

TYPING

877. Nyquist, Roy H. (Veterans Admin. Hosp., Long Beach 4, Calif.)

"Picture-lessons" in typewriting for aphasics, by Roy H. Nyquist and Georgia Crosthwaite. Arch. Phys. Med. and Rehab. June, 1955. 36:6: 401-406.

Teaching material to meet the needs of an aphasic patient must be for one hand only, must contain repetitive drill in unusually large amounts for the slow re-learning process characteristic of aphasia, and yet must stimulate and hold the patient's interest over a long period of time. A flexible method for devising such material for the standard keyboard is presented and a method for learning the keyboard very gradually is described. The method utilizes pictures; in the authors' experience, it has been found that patients learn the keyboard much faster and have a better retention of words and letters.

VOCATIONAL GUIDANCE

878. Gluck, Samuel (42 E. 41st St., New York 17, N. Y.)

Vocational counseling of the mentally retarded in a foster care agency. Jewish Soc. Service Quarterly. Fall, 1954. 31:1:123-129. Reprint.

Describes a cooperative program of the Jewish Child Care Association of New York and the Federation Employment and Guidance Service of New York to provide vocational counseling, job solicitation, job placement, and community exploration services for about one hundred mentally retarded foster children. Experiences with the group and problems in counseling and job placement are discussed.

879. U. S. Employment Service

Interviewing guides for specific disabilities: Orthopedic disabilities. Washington, D.C., The Service, 1954. 11 p. (L7.54: Or 8)

Another in the series of "Interviewing Guides," covering briefly a definition of various types of orthopedic disabilities, common characteristics, emotional reactions, aspects of rehabilitation and the use of appliances. Outlined for the counselor are factors in evaluation of work capacity, the use of the medical history in assessing capacity and the value of a history of previous employment. A list of cooperating agencies is supplied as a source of additional information helpful to the counselor.

Available from U. S. Superintendent of Documents, Washington 25, D.C., at 5¢ a copy.

VOLUNTARY HEALTH AGENCIES

880. Linck, Lawrence J. (11 S. La Salle St., Room No. 1130, Chicago 3, Ill.)
A battle won. Crippled Child. June, 1955. 33:1:4-6.
Citing the progress made by research in the prevention of poliomyelitis, Mr. Linck points out the importance of voluntary health agencies in promoting research in the prevention, care and treatment of disease.

VOLUNTEER WORKERS

881. Kansas. State Department of Social Welfare (Mrs. Loudell Frazier, Div. of Public Assistance, 801 Harrison St., Topeka, Kan.)
Activities in nursing homes; a handbook for volunteers. Topeka, The Dept., 1955. 73 p. illus. Mimeo.
Describes ways in which communities through a coordination of volunteer efforts can provide needed services for older persons in nursing homes. Includes a brief section on the need for activities in nursing homes, the psychological impact of aging and disease, the necessary qualifications and attitudes of volunteer workers, pointers on leadership, ways of working with residents of homes, and practical suggestions for activities of various types. A list of suggested community resources, sources for materials for activity programs, and references for further reading are given.
882. Malamud, Irene T. (41 Mt. Vernon St., Boston 8, Mass.)
Volunteers in community mental health work; the respective roles of laymen and professionally trained persons. Mental Hygiene. Apr., 1955. 39:2:300-309. Reprint.
Describes the program of the Massachusetts Assn. for Mental Health for the orientation, training, and education of lay volunteers in the work of the Association, and for the interpretation of goals of the program for new professional personnel.
883. National Association for Mental Health (1790 Broadway, New York 19, N. Y.)
Volunteers in mental hospitals. New York, The Association (1955?). 16 p. 25¢.
Part I, edited by Marjorie H. Frank, reviews the objectives and scope of volunteer programs in mental hospitals and is based on three separate articles published between 1948 and 1955. Earlier concepts are brought up to date. Part II, "The Volunteer Program," written by Dr. O. Arnold Kilpatrick, Director of Hudson River State Hospital, N. Y. State Dept. of Mental Hygiene, shows the actual application of many of the suggestions made in Part I. The article emphasizes the practical aspects of organizing and continuing a volunteer program.

WORKMEN'S COMPENSATION--CALIFORNIA

884. Welch, E. P. (965 Mission St., San Francisco 3, Calif.)
Permanent disability evaluation. Calif. Med. Jan., 1955. 82:1:35-38. Reprint.
Discusses the importance of physicians' reports for the purpose of permanent disability rating and how they differ in character and scope from the usual clinical report. Basic principles of the California system of permanent disability evaluation and the rating schedule are described. In spite of some objections to the system, experience has proved that with complete and precise reporting from physicians misunderstandings and needless delays in adjustment of cases are eliminated.

WORKMEN'S COMPENSATION--PROCEEDINGS

885. International Association of Industrial Accident Boards and Commissions
Workmen's compensation problems, 1954; proceedings, 40th annual convention of the... October 3-7, 1954. Washington, D.C., U.S. Bur. of Labor Standards (1955). 238 p. tabs. (Bul. no. 180)

Contains the reports of various committees on rehabilitation, legislative, medical, statistical, and safety aspects of workmen's compensation, together with papers presented at the various sessions. The reports of the Rehabilitation Committee and the Panel on Rehabilitation of Injured Workers appear on pp. 17-76.

Distributed by the U.S. Superintendent of Documents, Washington 25, D.C., at 65¢ a copy.

New Books Briefly Noted

BRAIN INJURIES

886. Strauss, Alfred A.

Psychopathology and education of the brain-injured child: Volume II. Progress in theory and clinic, by Alfred A. Strauss and Newell C. Kephart New York, Grune & Stratton, 1955. 266 p. illus. \$6.00.

Chapters deal with the anatomy and physiology of the central nervous system and brain injury in children, embryology and brain injury, the psychopathology of perception, language, concept formation, and behavior, and essays on mental functioning of brain-injured children. Dr. Samuel Goldenberg contributed two chapters on testing the brain-injured child with normal I.Q. and a scoring guide to the Marble Board Test and the Ellis Design Test. Laura E. Lehtinen also contributed two chapters on preliminary conclusions affecting education of brain-injured children and case histories of brain-injured children with normal I.Q. A bibliography of 289 references is included. The concept of the brain-injured child has, in this book, been enlarged to include the clinical syndrome of the brain-injured child who is not mentally defective, but who in spite of the "normalcy in I.Q." as tested is still "defective."

HANDICAPPED--FICTION

887. Bazin, Herve

Constance; a novel by Herve Bazin, translated from the French by Herma Briffault. New York, Crown Publishers, c1955. 216 p. \$3.00.

The story of Constance Orglaize, a young woman partially paralyzed by a spinal injury caused by a bomb in the war. Despite her own frail body, she seeks out several persons whom she attempts to influence and takes into her own home a cerebral palsied boy, unable to talk or walk, who is neglected by his mother. As her own condition deteriorates, she drives her friends toward more ambitious goals. Self-willed but selfless, possessed of a loving heart and an astringent mind and tongue, she presents a picture of rare courage. A literate novel reflecting thoughtful insight into human character and motivations.

HARD OF HEARING

888. Streng, Alice

Hearing therapy for children, by Alice Streng (and others). New York, Grune & Stratton, 1955. 371 p. illus. \$6.75.

Following an introductory chapter on the problems of deafness in children, which covers definitions, the social, emotional, and educational aspects of deafness, intelligence, personality, multiple handicaps, visual acuity, aphasia, and the importance of early discovery and evaluation, the five contributing authors orient the physician, psychologist, social worker, therapist and teacher in dealing with the various problems. The responsibilities of each in developing and improving the educational and therapeutic facilities for children with hearing disorders are defined. A list of established hearing rehabilitation centers in the United States is appended.

SOCIAL WELFARE--BIBLIOGRAPHY

889. United Nations. Bureau of Social Affairs

Bibliography of publications of the United Nations and specialized agencies in the social welfare field, 1946-1952. New York, The Bureau, 1955. 270 p. (Social welfare information ser.; International issue. ST/ SOA/Ser. F/10:3)

The Social Welfare Information Series, compiled by the United Nations Social Reference Centre, is now published in three separate issues-- national, international, and special. The International issue, compiled on the basis of data collected by the U.N. Secretariat and that furnished by the agencies and organizations concerned, is a subject classification outline listing all the more important social welfare topics dealt with in the Series and a cumulative index of participating countries and of reports published to date in all three issues of the Series. Current publications of the United Nations, specialized agencies and related inter-governmental and international non-governmental organizations are listed and annotated. Section XIII lists publications on "Rehabilitation of the Handicapped."

SOCIAL WELFARE--SURVEYS

890. Warren, Roland L.

Studying your community. New York, Russell Sage Foundation, 1955. 385 p. graphs. \$3.00.

A working manual for laymen and those engaged in some branch of community service, this book supersedes Joanna C. Colcord's "Your Community," published by the Foundation in 1939. Specific aspects of the community--its health, education, recreation, child welfare, and housing needs--are covered, with suggestions for organizational, planning, and action programs. The use of annotated questions for collecting pertinent information--a feature of the Colcord book--is continued here but with less emphasis on formal agencies and with broader general coverage. Survey methods and procedures are described, references to sources for the detailed information needed are given, and characteristics, conditions and trends of American community life which are especially relevant to community surveys are indicated. Chap. 12, "Health," includes a consideration of chronic diseases, and Chap. 13, "Provision for Special Groups," discusses the handicapped and aging.

SPECIAL EDUCATION--STUDY UNITS AND COURSES

891. Abraham, Willard

A guide for the study of exceptional children. Tempe, Arizona, The Author, c1955. 263 p. Multilithed.

This guide was prepared for use by groups with limited time for study as well as for those with long-range programs; it includes a section on procedures of group work and workshops to explain techniques which may be unfamiliar to many. Major interest areas cover the bi-lingual, the emotionally and socially maladjusted, the gifted, those with hearing, speech and vision difficulties, the mentally retarded, the orthopedically handicapped, and children with reading disabilities. Specific and general study guides are provided for each area and the book provides very extensive bibliographies, sources of materials of a more general nature. Modern methods of special education are stressed.

Available from College Bookstore, Arizona State College, Tempe, Arizona, at \$3.95, plus 25¢ postage.

